SERFF Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599

Company Tracking #: UHCLIC 32

State:

Missouri

Filing Company:

UnitedHealthcare Life Insurance Company

TOI/Sub-TOI: Product Name: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO) Individual

Project Name/Number: UHCLIC/UHCLIC 32

Filing at a Glance

Company:

UnitedHealthcare Life Insurance Company

Product Name:

Individual

State:

Missouri

TOI:

H16I Individual Health - Major Medical

Sub-TOI:

H16I.005A Individual - Preferred Provider (PPO)

Filing Type:

Form

Date Submitted:

05/02/2016

SERFF Tr Num:

AMMS-130554599

SERFF Status:

Closed-FILED

State Tr Num:

AMMS-130554599

State Status:

FILED

Co Tr Num:

UHCLIC 32

Implementation

01/01/2017

Date Requested:

Author(s):

Lori Moline, Merry Walker

Reviewer(s):

Melissa Stanley (primary)

Disposition Date:

05/05/2016

Disposition Status:

FILED

Implementation Date:

05/05/2016

State Filing Description:

11

SERFF Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599 Company Tracking #: UHCLIC 32

State:

Missouri

Filing Company:

UnitedHealthcare Life Insurance Company

TOI/Sub-TOI: Product Name: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO) Individual

Project Name/Number: UHCLIC/UHCLIC 32

General Information

Project Name: UHCLIC

Status of Filing in Domicile: Not Filed

Project Number: UHCLIC 32 Requested Filing Mode: Informational Explanation for Combination/Other:

Domicile Status Comments: Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Date Approved in Domicile:

Overall Rate Impact:

Filing Status Changed: 05/05/2016 State Status Changed: 05/05/2016

Deemer Date: Created By: Lori Moline

Submitted By: Lori Moline

Corresponding Filing Tracking Number:

State TOI: H16I Individual Health - Major Medical

Filing Description:

The attached contains confidential, proprietary information and trade secrets not known to the public and subjected to reasonable efforts to maintain its secrecy. Accordingly, this information is protected from disclosure by state and federal law. It may not be disclosed to any third parties or other state or federal regulatory agencies unless UnitedHealthcare agrees in writing to its disclosure.

Please see the attached letter and draft notice under the Supporting Documentation tab.

This filing is just for the UnitedHeatlhcare Life Insurance Company. The All Savers Insurance Company bracketed in the MO Attachment 2 on the Supporting Documentation tab is filed under SERFF Tracking Number UHLC-130554610.

Thank you.

Company and Contact

Filing Contact Information

Lori Moline, Contract Analyst

lamoline@unitedhealthone.com 800-926-7602 [Phone] 7089 [Ext]

Indianapolis, IN 46278-1719

7440 Woodland Drive

317-328-9645 [FAX]

Filing Company Information

UnitedHealthcare Life Insurance

CoCode: 97179

State of Domicile: Wisconsin

Company 3100 AMS Blvd Group Code: 707 Group Name:

Company Type: State ID Number:

PO Box 19032

FEIN Number: 86-0207231

Green Bay, WI 54307-9032

(800) 232-5432 ext. [Phone]

Filing Fees

Fee Required?

Yes

Fee Amount:

\$50.00

Retaliatory?

No

Fee Explanation:

1 filing X \$50 - \$50.

00002

PDF Pipeline for SERFF Tracking Number AMMS-130554599 Generated 05/11/2016 12:40 PM

SERFF Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599 Company Tracking #: UHCLIC 32

State:

Missouri

Filing Company:

UnitedHealthcare Life Insurance Company

TOI/Sub-TOI:

H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

Product Name:

Individual

Project Name/Number: UHCLIC/UHCLIC 32

Per Company:

Yes

Company

UnitedHealthcare Life Insurance Company

Amount

Date Processed

Transaction #

\$50.00

05/02/2016

108912774

State Specific

If your policy forms contain variable TEXT (brackets or other means denoting variation), please indicate the total number of policy form variations that your company intends to generate, based on the variable TEXT. (This EXCLUDES sales projections, and any variable dollar amounts.) Please review DIFP Filing Guidelines at

http://insurance.mo.gov/industry/filings/lh/index.php for additional guidance regarding the use of variable text in policy form fillings. If there is no variable text in your policy form(s), please indicate "no variable text". DIFP will accept the following responses to this question: a digit; the phrase "no variable text"; the phrase "n/a" if the filing is rates, reports, advertising, or Medicare supplement forms. Please do not put an explanation of variability in this field. Please attach that separately in an explanation of variability under the "Supporting Documentation" tab. Please call the L&H Manager at 573-526-0672 with any questions.: Not Applicable

	ypany			p el			Date Submitted 05/05/2016
cking #: UHCLIC 32	UnitedHealthcare Life Insurance Company		7.0	Date Submitted 05/05/2016			Created On 05/05/2016
Company Tracking #:				Created On 05/05/2016		Response Leners	Responded By Lori Moline
:king #: AMMS-130554599	Missouri H161 Individual Health - Major Medical/H161.005A Individual - Preferred Provider (PPO) Individual UHCLIC/UHCLIC 32						Date Submitted 05/03/2016
0554599 State Tracking #:	Missouri H161 Individual Health - Major Me Individual UHCLIC/UHCLIC 32	mmary		3y er	esponse Letters		Created On ey 05/03/2016
SERFF Tracking #: AMMS-130554599	State: TOVSub-TOI: H16I Indi O Product Name: Individue O Project Name/Number: UHCLIC	Correspondence Summary	Dispositions	ts Created By Mary Mealer	Objection Letters and Response Letters	Objection Letters	Status Created By PENDING Melissa Stanley COMPANY RESPONSE
SERFF	State: TOUSUI Produc Project	Corr	nisp	Status	Obje	Cole	Status PENDING COMPANY RESPONS

UHCLIC 32 Company Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599 SERFF Tracking #:

TOI/Sub-TOI:

H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO)

UnitedHealthcare Life Insurance Company

Filing Company:

UHCLICAUHCLIC 32 Individual O Product Name:
O Project Name/Number:
G

Disposition

Disposition Date: 05/05/2016

Implementation Date: 05/05/2016

Status: FILED

Comment: Per company's request removed confidentiality.

Rate data does NOT apply to filing.

Public Access 2 2 INFORMATIONAL ONLY Schedule Item Status FILED Company's Authorization to file for Third Party Filers Letter and Draft Notice Schedule Item Supporting Document Supporting Document Schedule

Company Tracking #: UHCLIC 32

SERFF Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599

State:

Missouri

Filing Company:

UnitedHealthcare Life Insurance Company

TOI/Sub-TOI: Product Name: H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO) Individual

Project Name/Number: UHCLIC/UHCLIC 32

Objection Letter

Objection Letter Status

PENDING COMPANY RESPONSE

Objection Letter Date

05/03/2016

Submitted Date Respond By Date 05/03/2016 05/06/2016

Dear Lori Moline,

Introduction: Please address the following:

Objection 1

Comments: You have requested that the entire filing be kept confidential as trade secret. Please explain for each component or aspect of the filing how such component or aspect meets the definition of "trade secret" under 417.453 RSMo:

- 4) "Trade secret", information, including but not limited to, technical or nontechnical data, a formula, pattern, compilation, program, device, method, technique, or process, that:
- (a) Derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by other persons who can obtain economic value from its disclosure or use; and
- (b) Is the subject of efforts that are reasonable under the circumstances to maintain its secrecy.

Conclusion:

Thank you for your time and attention.

Sincerely,

Melissa Stanley

SERFF Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599 Company Tracking #: UHCLIC 32

State:

Missouri

Filing Company:

UnitedHealthcare Life Insurance Company

TOI/Sub-TOI: Product Name: H16I Individual Health - Major Medical/H16I,005A Individual - Preferred Provider (PPO)

Individual

Project Name/Number: UHCLIC/UHCLIC 32

Response Letter

Response Letter Status

Submitted to State

Response Letter Date

05/05/2016

Submitted Date

05/05/2016

Dear Melissa Stanley,

Introduction:

This is response to your objection sent on May 5, 2016.

Response 1

Comments:

UnitedHealthcare Life Insurance Company would like to remove the confidentiality.

I have tried to edit and remove the setting, unfortunately I am unable to do this.

Can the Department remove the setting for Confidentiality?

Related Objection 1

Comments: You have requested that the entire filing be kept confidential as trade secret. Please explain for each component or aspect of the filing how such component or aspect meets the definition of "trade secret" under 417.453 RSMo:

- 4) "Trade secret", information, including but not limited to, technical or nontechnical data, a formula, pattern, compilation, program, device, method, technique, or process, that:
- (a) Derives independent economic value, actual or potential, from not being generally known to, and not being readily ascertainable by proper means by other persons who can obtain economic value from its disclosure or use; and
- (b) Is the subject of efforts that are reasonable under the circumstances to maintain its secrecy.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

No Rate/Rule Schedule items changed.

Conclusion:

Thank you for your time In this matter.

Lori Moline

Sincerely,

Lori Moline

Company Tracking #: AMMS-130554599 State Tracking #: AMMS-130554599 SERFF Tracking #:

TOI/Sub-TOI:

H16I Individual Health - Major Medical/H16I.005A Individual - Preferred Provider (PPO) Filing Company:

UnitedHealthcare Life Insurance Company

UHCLIC 32

Individual

UHCLICAUHCLIC 32 O Project Name/Number:

Supporting Document Schedules

Company's Authorization to file for Third Party Filers Bypassed - Item:

Not Applicable Bypass Reason:

INFORMATIONAL ONLY Attachment(s): Item Status:

Letter and Draft Notice 05/05/2016 Satisfied - Item: Status Date:

MO_Market Withdrawal Notice 4.15.16.pdf MO_Attachment 2_3-23-16_Market Exit Letter_Final_OFF Exchange.pdf

Attachment(s):

Comments:

Item Status:

05/05/2016 Status Date:



April 15, 2016

Missouri Department of Insurance Attn: Director Huff PO Box 690 Jefferson City, MO 65102-0690

Re: All Savers Insurance Company, NAIC #82406

UnitedHealthcare Life Insurance Company, NAIC #97179

Dear Director Huff:

I am providing you with this formal notice of our intention to effectuate an individual market exit effective 1/1/2017, consistent with Missouri law and in the federal rules under 45 CFR § 147.106(d) and 148.122(e), as well as our decision not to participate on the Individual Exchange for 2017.

Our decision by license:

All Savers Insurance Company – Compass. Individual market exit to take effect on 1/1/17 with notice to current enrollees to occur a minimum of 180 days prior to 1/1/17 (mailed no later than 7/1/16). Consequently, we will not participate in the Individual Exchange for coverage dates in 2017.

<u>UnitedHealthcare Life Insurance Company</u> – Compass Plus, Navigate Plus. Individual market exit to take effect on 1/1/17, with notice to current enrollees to occura minimum of 180 days prior to 1/1/17 (mailed no later than 7/1/16).

This notice of our individual market exit, and Individual Exchange non-participation decision, does not impact any other UnitedHealthcare licenses, products, market segments (individual, small group and large group), or other lines of business not expressly described above.

I have attached a draft copy of the enrollee 180 day market exit notices referenced above for your records and labeled as Attachments 1 & 2, respectively (one version for Individual Exchange and the other for non-Individual Exchange enrollees).

I will be reaching out to the Department to discuss, in greater detail, our intentions related to 2017. However, if you have any additional questions or require any additional information immediately, please feel free to contact me at 512.426.6761.

Sincerely,

Kandice K. Sanaie

Director, Regulatory Affairs

Tel: 512.426.6761, Kandice Sanaica uhc.com

Krene KD

Attachment 2

Important:

We are not offering your current health plan in your area next year. Take action by December 31, 2016, to ensure you have coverage in 2017. Read this letter to learn more.

[Date of Notice]

[FirstName][Lt Name] [Address line 1] [Address line 2] [City][State][Zip]

Dear [First Name of Subscriber]:

Thank you for being a UnitedHealthcare member. Every year, insurance companies can make changes to the plans and coverage options they offer. Unfortunately, [All Savers Insurance Company] [UnitedHealthcare Life Insurance Company] will no longer be offering individual plans in 2017. This means you must enroll in a new plan to have health insurance in 2017. The last day of your coverage is December 31, 2016.

What are my options for getting coverage?

You have three ways to look into other plans and enroll:

- 1. Visit healthcare.gov and look at other plans.
- 2. Visit healthcare.gov and see if you or your family qualify for Medicaid or the Children's Health Insurance Program.
- 3. Look at other plans outside of the Marketplace.

Keep in mind that if you qualify for financial assistance that lowers your monthly premiums and out-of-pocket costs, you can only get these savings if you enroll through the Marketplace.

What if I can't afford a Marketplace plan?

You can contact the Marketplace and apply for a hardship exemption. This exemption will allow you to buy a catastrophic plan that usually has lower monthly premiums and will mainly protect you from very high medical costs.

When do I need to make a decision?

The 2017 Open Enrollment period is from November 1, 2016 through January 31, 2017.

This is the easiest way to enroll.

- If you enroll by December 15, 2016, your coverage can be effective January 1, 2017.
- No proof of loss of coverage is required.

Because your plan is ending, you also qualify to enroll during a Special Enrollment period during the 60 days before and 60 days after December 31, 2016.

- If you enroll by December 31, 2016, your coverage can be effective January 1, 2017.
- Proof of loss of coverage is required.

We appreciate the opportunity to have served you.

Questions?

- Call us at the toll-free member number on your health plan ID card. TTY users dial 711.
- Visit healthcare.gov or call toll-free at 1-800-318-2596, TTY 1-855-889-4325 to learn more and to see if you qualify for lower costs.
- Visit LocalHelp.HealthCare.gov to find personal help in your area.

Sincerely,

The UnitedHealthcare Team

[Add state specific meaningful access language]